



U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

DECLARATION

ATTORNEY'S DOCKET NO.

1662/79802

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **IMPROVED FORMULATIONS OF AMLODIPINE MALEATE**, the specification of which was filed on April 12, 2004 as U.S. Serial No. 10/823,802.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

PRIOR UNITED STATES APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

APPLICATION NUMBER	FILING DATE (day, month, year)
60/462,813	14 April 2003

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

Steven J. Lee, Esq.
KENYON & KENYON
One Broadway
New York, New York 10004-1050

CUSTOMER NUMBER 26646

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME PRAGAI	FIRST GIVEN NAME Gabor	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Debrecen	STATE OR FOREIGN COUNTRY Hungary	COUNTRY OF CITIZENSHIP Hungary
POST OFFICE ADDRESS	POST OFFICE ADDRESS Jeriko Str. 15	CITY 4032 Debrecen	STATE & ZIP CODE/COUNTRY
			Hungary

Signature *Gabor Galvi* Date 13/09/2004

FULL NAME OF INVENTOR	FAMILY NAME OROSZ	FIRST GIVEN NAME Eva	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Debrecen	STATE OR FOREIGN COUNTRY Hungary	COUNTRY OF CITIZENSHIP Hungary
POST OFFICE ADDRESS	POST OFFICE ADDRESS Gyimes Str. 28/C	CITY 4032 Debrecen	STATE & ZIP CODE/COUNTRY
			Hungary

Signature *Eva Orosz* Date 13/09/2004

FULL NAME OF INVENTOR	FAMILY NAME SZILAGYI	FIRST GIVEN NAME Judit	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Debrecen	STATE OR FOREIGN COUNTRY Hungary	COUNTRY OF CITIZENSHIP Hungary
POST OFFICE ADDRESS	POST OFFICE ADDRESS Derek Str. 235	CITY 4031 Debrecen	STATE & ZIP CODE/COUNTRY
			Hungary

Signature *Dr. Judit Szilagyi* Date 13/09/2004

FULL NAME OF INVENTOR	FAMILY NAME NAGY	FIRST GIVEN NAME Edit	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Debrecen	STATE OR FOREIGN COUNTRY Hungary	COUNTRY OF CITIZENSHIP Hungary
POST OFFICE ADDRESS	POST OFFICE ADDRESS Civis str. 8	CITY 4032 Debrecen	STATE & ZIP CODE/COUNTRY Hungary
Signature	<i>Dagy Lidia neve!</i>		Date 13/09/2004.
FULL NAME OF INVENTOR	FAMILY NAME BAN	FIRST GIVEN NAME Lidia	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Debrecen	STATE OR FOREIGN COUNTRY Hungary	COUNTRY OF CITIZENSHIP Hungary
POST OFFICE ADDRESS	POST OFFICE ADDRESS Endre str. 48	CITY 4033 Debrecen	STATE & ZIP CODE/COUNTRY Hungary
Signature	<i>Bán Lidia</i>		Date 13/09/2004